BEST AVAILABLE COPY

ļ		Application or Docket Number										
	PATENT /	ON RECOF	סו		/		_					
		09/942592										
CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
Γ	STAL CLAIMS		(Column 1)		(Column 2)		TYPE			OR	SMALL	ENTITY
TOTAL ÇLAIMS					A Seller			E	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE (355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		*		X\$ 9)=		OR	X\$18=	
INDEPENDENT CLAIMS 2			3 minus 3 =		/		X40	=		OR	X80=	80
MU	LTIPLE DEPEN	NDENT CLAIM PI	RESENT					5= T		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			TOTA	AL		OR	TOTAL	790	
CLAIMS AS AMENDED - PART II											OTHER	
						(Column 3)	SMAI	LL EN	ITITY	OR	SMALL	
ENT A	aller Co., it is illigade Aller Co., Co. Sollare aller son	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RATI	E ∣ ⊤	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X40=	_		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				Γ CLAIM		105	十		1 1	272	
				•			+135			OR	+270=	
								EE _		OR ADDIT FEE		
_		(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										
DMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RATE	Ξ ΤΙ	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9:	=		OR	X\$18=	
AMEN	Independent	<u> </u> *	Minus	***		=	X40=	1		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		105	+		l	270	
							+135			OR	+270=	
							TOT ADDIT. F			OR ,	TOTAL ADDIT. FEE	
_		(Column 1)	(Column 3)									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA	RATE	ΤI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9=	_		OR	X\$18=	
ME	Independent	*	Minus	***		=	X40=	1, (X80=	
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		740-	+		OR		
• 1	et e e e e e e e e e e e e e e e e e e	e e e e e e e e e e e e e e e e e e e		- '			+135=	• [_		OR	+270=	
**	If the "Highest Nun	mn 1 is less than th mber Previously Pa	aid For" IN THIS	S SPACE is	s less thai	n 20, enter "20."	TOTA ADDIT. FE			OR ,	TOTAL ADDIT. FEE	
•••···	f the "Highest Nur The "Highest Num	mber Previously Pa ber Previously Paid	aid For" IN THIS d For" (Total or	S SPACE is r Independe	s less tha ent) is the	in 3, enter "3." highest number í			priate box			